

MAR 25 2011

CITY CLERK DEPT.
CITY OF RANCHO CORDOVA

Please type or print in ink.

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NAME OF FILER (LAST) (FIRST) (MIDDLE)
Budge Linda Anne

1. Office, Agency, or Court

Agency Name City of Rancho Cordova

Division, Board, Department, District, if applicable City Council Member

► If filing for multiple positions, list below or on an attachment.
Agency: Community Redevelopment Agency - RC Financing Authority
Position: Board Member

2. Jurisdiction of Office (Check at least one box)

☐ State ☐ Judge (Statewide Jurisdiction)
☐ Multi-County ☐ County of _____
☒ City of Rancho Cordova ☐ Other _____

3. Type of Statement (Check at least one box)

☒ Annual: The period covered is January 1, 2010, through December 31, 2010.
-or-
The period covered is _____, through December 31, 2010.
☐ Assuming Office: Date _____
☐ Leaving Office: Date Left _____
(Check one)
☐ The period covered is January 1, 2010, through the date of leaving office.
☐ The period covered is _____, through the date of leaving office.
☐ Candidate: Election Year _____ Office sought, if different than Part 1: _____

4. Schedule Summary

Check applicable schedules or "None."

► Total number of pages including this cover page: 4

☐ Schedule A-1 - Investments - schedule attached
☒ Schedule A-2 - Investments - schedule attached
☒ Schedule B - Real Property - schedule attached
☐ Schedule C - Income, Loans, & Business Positions - schedule attached
☒ Schedule D - Income - Gifts - schedule attached
☐ Schedule E - Income - Gifts - Travel Payments - schedule attached
-or-
☐ None - No reportable interests on any schedule

herein and in any attached schedules is true and complete. I acknowledge this is
I certify under penalty of perjury under the laws of the State of California that

Date Signed 22 March 2011
(month, day, year)

Signature

SCHEDULE A-2
Investments, Income, and Assets
of Business Entities/Trusts
(Ownership Interest is 10% or Greater)

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
Name
C.A. Budge

1. BUSINESS ENTITY OR TRUST

Name Geometra Planning
Address (Business Address Acceptable) 3451 Corvina Drive Reno NV 89509
Check one
☐ Trust, go to 2 ☒ Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

Land Use Planning & Permitting
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
☐ \$2,000 - \$10,000
☒ \$10,001 - \$100,000 / / 10
☐ \$100,001 - \$1,000,000 ACQUIRED DISPOSED
☐ Over \$1,000,000

NATURE OF INVESTMENT

☐ Sole Proprietorship ☐ Partnership ☐ Other

YOUR BUSINESS POSITION _____

2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)

☐ \$0 - \$499 ☒ \$10,001 - \$100,000
☐ \$500 - \$1,000 ☐ OVER \$100,000
☐ \$1,001 - \$10,000

3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)

4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST

Check one box:

☐ INVESTMENT ☐ REAL PROPERTY

Name of Business Entity or
Street Address or Assessor's Parcel Number of Real Property

Description of Business Activity or
City or Other Precise Location of Real Property

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
☐ \$2,000 - \$10,000
☐ \$10,001 - \$100,000 / / 10
☐ \$100,001 - \$1,000,000 ACQUIRED DISPOSED
☐ Over \$1,000,000

NATURE OF INTEREST

☐ Property Ownership/Deed of Trust ☐ Stock ☐ Partnership

☐ Leasehold Yrs. remaining ☐ Other

☐ Check box if additional schedules reporting investments or real property are attached

1. BUSINESS ENTITY OR TRUST

Name _____
Address (Business Address Acceptable) _____
Check one
☐ Trust, go to 2 ☐ Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
☐ \$2,000 - \$10,000
☐ \$10,001 - \$100,000 / / 10
☐ \$100,001 - \$1,000,000 ACQUIRED DISPOSED
☐ Over \$1,000,000

NATURE OF INVESTMENT

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YOUR BUSINESS POSITION _____

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☐ \$500 - \$1,000 ☐ OVER \$100,000
☐ \$1,001 - \$10,000

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☐ Over \$1,000,000

NATURE OF INTEREST

☐ Property Ownership/Deed of Trust ☐ Stock ☐ Partnership

☐ Leasehold Yrs. remaining ☐ Other

☐ Check box if additional schedules reporting investments or real property are attached

Comments: _____

SCHEDULE D
Income – Gifts

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION Name <u>L.A. Budge</u>

► NAME OF SOURCE
Catholic Healthcare West

ADDRESS (Business Address Acceptable)
3400 Data Drive RC 95670

BUSINESS ACTIVITY, IF ANY, OF SOURCE
health care

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>4/18/2010</u>	<u>\$ 43.52</u>	<u>brunch</u>
___/___/___	\$ _____	_____
___/___/___	\$ _____	_____

► NAME OF SOURCE
Gen Corp - propulsion manufacture

ADDRESS (Business Address Acceptable)
PO Box 837012

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Sacramento CA 95853-7012

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>4/18/2010</u>	<u>\$ 43.52</u>	<u>brunch</u>
___/___/___	\$ _____	_____
___/___/___	\$ _____	_____

► NAME OF SOURCE
Diepenbrock Law Firm

ADDRESS (Business Address Acceptable)
400 Capitol Mall - Sac 95814

BUSINESS ACTIVITY, IF ANY, OF SOURCE
law firm

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>4/18/2011</u>	<u>\$ 43.52</u>	<u>brunch</u>
___/___/___	\$ _____	_____
___/___/___	\$ _____	_____

► NAME OF SOURCE
Granite Construction Inc

ADDRESS (Business Address Acceptable)
8950 Cal Center Drive - Suite 201

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Sacramento CA 95826

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>4/18/2010</u>	<u>\$ 43.52</u>	<u>brunch</u>
___/___/___	\$ _____	_____
___/___/___	\$ _____	_____

► NAME OF SOURCE
Reichert Aggregates

ADDRESS (Business Address Acceptable)
Sacramento CA 95825

BUSINESS ACTIVITY, IF ANY, OF SOURCE
aggregate mining & processing

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>4/19/2011</u>	<u>\$ 36.-</u>	<u>dinner</u>
___/___/___	\$ _____	_____
___/___/___	\$ _____	_____

► NAME OF SOURCE
Sutter Health

ADDRESS (Business Address Acceptable)
2800 L Street Sacramento 95816

BUSINESS ACTIVITY, IF ANY, OF SOURCE
health care

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>4/19/2011</u>	<u>\$ 36.-</u>	<u>dinner</u>
___/___/___	\$ _____	_____
___/___/___	\$ _____	_____

Comments: _____

SCHEDULE D Income - Gifts

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name <u>CA. Budge</u>

▶ NAME OF SOURCE
INT - Amer Promotional Gifts
ADDRESS (Business Address Acceptable)
8151 Power Ridge Rd - Sac 95826
BUSINESS ACTIVITY, IF ANY, OF SOURCE
fireworks +

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>6/19/2010</u>	<u>\$ 69.95</u>	<u>fireworks</u>
<u> </u>	<u>\$</u>	<u>4JTFF</u>
<u> </u>	<u>\$</u>	<u> </u>

▶ NAME OF SOURCE
CA Exposition & State Fair
ADDRESS (Business Address Acceptable)
PO Box 15649 - Sac 95852
BUSINESS ACTIVITY, IF ANY, OF SOURCE
state fair admission - pkg - 1 concert ticket

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>July 2010</u>	<u>\$ 50.-</u>	<u>tickets</u>
<u> </u>	<u>\$</u>	<u> </u>
<u> </u>	<u>\$</u>	<u> </u>

▶ NAME OF SOURCE
Persian Language Advisory Comm.
ADDRESS (Business Address Acceptable)
828 I Street - Sac 95814
BUSINESS ACTIVITY, IF ANY, OF SOURCE
support Library's Persian collection

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>Sept 2010</u>	<u>\$ 135.00</u>	<u>dinner</u>
<u> </u>	<u>\$</u>	<u> </u>
<u> </u>	<u>\$</u>	<u> </u>

▶ NAME OF SOURCE

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u> </u>	<u>\$</u>	<u> </u>
<u> </u>	<u>\$</u>	<u> </u>
<u> </u>	<u>\$</u>	<u> </u>

▶ NAME OF SOURCE

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u> </u>	<u>\$</u>	<u> </u>
<u> </u>	<u>\$</u>	<u> </u>
<u> </u>	<u>\$</u>	<u> </u>

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ADDRESS (Business Address Acceptable)

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DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u> </u>	<u>\$</u>	<u> </u>
<u> </u>	<u>\$</u>	<u> </u>
<u> </u>	<u>\$</u>	<u> </u>

Comments: _____